								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO \mathcal{R} . C. ϵ .								o9/537025					
-			04/ 5	2 7	1023								
_	MSB	CLAIMS A	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS							Γ	RATE	FEE	1	RATE	FEE	
FOR O			NUMBER FILED		NUMBER EXTRA		В	IASIC FEE	395	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			10 minus 32		6			X\$		OR	X\$	/	
INDEPENDENT CLAIMS			1 minus 3		· P			Х		OR	Х		
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+		OR	+		
								TOTAL		OR	TOTAL	790.	
CLAIMS AS AMENDED - PART II									L	1011	OTHÉR		
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL		
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$		OR	X\$		
	Independent	*	Minus	***		=		Χ.		OR	Х		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
	•						L	+		OR	+	<u></u>	
							۸۲	TOTAL		OR	TOTAL ADDIT FEE		
			(Colui										
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	##		=		X\$		OR	X\$		
	Independent	* .	Minus	***		=		Х		OR	Х		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UN			
								+		OR	+		
							A	TOTAL		OR	TOTAL ADDIT_EEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT	en e	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	:	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$		OR	X\$		
	Independent	*	Minus	***		=	.	X		0.0	X		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR		 	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+		
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FÉE		
	וו the "Highest Nui The "Highest Num	mber Previously Pa ber Previously Pal	ald For" IN TH d For" (Total o	IS SPACE Independ	is less the ent) is the	an 3, entér "3." e highest number		_	oropriate box				